

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>214520295</b>				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>Stonegate Mortgage Corporation</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>REGISTERED AGENT SOLUTIONS INC</b>  <b>7288 HANOVER GREEN DR</b>  <b>MECHANICSVILLE, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HANOVER COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>OH</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>5/31/2014</b></p> <p>SCC ID NO: <b>F1897323</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000,000
CLASS	AUTHORIZED					
COMMON	1,000,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 9190 PRIORITY WAY WEST DR STE 300</p> <p style="text-align: center;">CITY/ST/ZIP: INDIANAPOLIS, IN 46240</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DANIEL BETTENBURG  TITLE: PRESIDENT  ADDRESS: 9190 PRIORITY WAY WEST DR  SUITE 300  CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: DANIEL BETTENBURG TITLE: PRESIDENT ADDRESS: 9190 PRIORITY WAY WEST DR SUITE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: DANIEL BETTENBURG TITLE: PRESIDENT ADDRESS: 9190 PRIORITY WAY WEST DR SUITE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN SWAIN  TITLE: EX VP  ADDRESS: 157 S MAIN STREET  CITY/ST/ZIP/CO: MANSFIELD, OH 44902 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN SWAIN TITLE: EX VP ADDRESS: 157 S MAIN STREET CITY/ST/ZIP/CO: MANSFIELD, OH 44902	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: BARBARA CUTILLO  TITLE: CAO  ADDRESS: 9190 PRIORITY WAY WEST DR  STE 300  CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: BARBARA CUTILLO TITLE: CAO ADDRESS: 9190 PRIORITY WAY WEST DR STE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JAMES CUTILLO  TITLE: CEO Director  ADDRESS: 9190 PRIORITY WAY WEST DR  STE 300  CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JAMES CUTILLO TITLE: CEO Director ADDRESS: 9190 PRIORITY WAY WEST DR STE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: JAMES CUTILLO TITLE: CEO Director ADDRESS: 9190 PRIORITY WAY WEST DR STE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN MACKE  TITLE: CFO  ADDRESS: 9190 PRIORITY WAY WEST DR  STE 300  CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN MACKE TITLE: CFO ADDRESS: 9190 PRIORITY WAY WEST DR STE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: JOHN MACKE TITLE: CFO ADDRESS: 9190 PRIORITY WAY WEST DR STE 300 CITY/ST/ZIP/CO: INDIANAPOLIS, IN 46240	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				

NAME:	ROBERT MEACHUM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	9190 PRIORITY WAY WEST DR STE 300		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240		
NAME:	ERIC SCHOLTZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	9190 PRIORITY WAY WEST DR STE 30		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240		
NAME:	BRYAN SPECHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	9190 PRIORITY WAY WEST DR STE 300		
CITY/ST/ZIP/CO:	INDIANAPOLIS, IN 46240		
NAME:	KEVIN B BHATT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	241 Central Park West #8G		
CITY/ST/ZIP/CO:	New York, NY 10011		
NAME:	JAMES G BROWN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	169 Colonial Parkway STE 300		
CITY/ST/ZIP/CO:	Manhasset, NY 11030		
NAME:	RICHARD A MIRRO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12360 S. Pleasant Grove Rd.		
CITY/ST/ZIP/CO:	Floral City, FL 34436		
NAME:	JOSEPH SCOTT MUMPHREY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11338 Hanbury Manor Blvd.		
CITY/ST/ZIP/CO:	Noblesville, IN 46060		
NAME:	Shmuel Levinson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2 Wilder Road		
CITY/ST/ZIP/CO:	Monsey, NY 10952		
NAME:	Richard Kraemer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4 Mansfield Circle		
CITY/ST/ZIP/CO:	Bluffton, SC 29910		
NAME:	Michael J. McElroy	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9190 Priority Way West Dr. Suite 300		
CITY/ST/ZIP/CO:	Indianapolis, IN 46240		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

/s/ Michael J.McElroy	Michael J.McElroy,	4/21/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		